PATENT JFW DOCKET NO. Q147-US2

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RANGE Re Application of:

TSUKAMOTO et al.

Examiner:

Edward H. Tso

Serial No.:

10/718,927

Art Unit:

2838

Filed: November 19, 2003

For:

IMPLANTABLE MEDICAL

**POWER MODULE** 

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### AMENDMENT AND REQUEST FOR RECONSIDERATION

This communication is in response to the Office Action mailed October 20, 2004.

AG 00.03

01 FC:2251

03/11/5002 b10ME21 00000003 200351 1018855

## FEE TRANSMITTAL

Ā.1	
Attorney Docket No.	Q147-US2
First Named Inventor:	Hisashi Tsukamoto et al.
Application Number	10/718,927
Filing Date:	November 19, 2003
Examiner Name:	Edward H. Tso
Group/Art Unit:	2838

X The Commissioner is hereby authorized to charge indicated fees and/or adit any over payment to:
posit Account No.: 50-0921 posit Account Name: Quallion LLC
X Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
Payment Enclosed: Check Money Order Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	ra (4) Large Entity (5) Small Entity		(6) Calculations		
Basic Filing Fee	xx	XX	\$ 300.00	\$150.00	\$ .00		
Total Claims	30 - 70 =	0	X \$ 50.00	X \$ 25.00	\$ .00		
Independent Claims	4- 7=	0	X \$ 200.00	X \$ 100.00	\$ .00		
Multiple Dependent Cla	Multiple Dependent Claim(s) (if applicable) \$ 360.00 \$180.00						
	\$ .00						

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 200.00	\$ 100.00	\$ 000.00
Reissue filing fee	\$ 300.00	\$ 150.00	\$ 0.00
Provisional filing fee	\$ 200.00	\$ 100.00	\$ 00.00
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3. ADDITIONAL FEES		18927	101 105 TO	2916 Ref: 00000002 D
Fee Description	Large Entity	Small Entity	12600¢ 70000000 Other	1934010 2006/11/60
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		TOTAL:	S	

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)		42,491
Signature		Date 2/15/2005		005



# **TRANSMITTAL** FORM (to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/718,927
Filing Date	November 19, 2003
First Named Inventor	Hisashi Tsukamoto et al.
Group Art Unit	2838
Examiner Name	Edward Tso
Attorney Docket Number	Q147-US2

ENCLOSURES (check all that apply)								
x Fee Transmittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group						
x Fee Authorized	Drawing(s)	Appeal Communication to Board of Appeals and Interferences						
X Amendment	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)						
After Final	Petition to Covert to a Provisional Application	Proprietary Information						
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter						
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please identify below):						
Express Abandonment Request	Request for Refund							
Information Disclosure Statement	CD, Number of CD(s)							
	Remarks							
Certified Copy of Priority Document(s)								
Response to Missing Parts/ Incomplete Application								
Response to Missing Parts under 37 CFR 1.52 or 1.53								
Customer Number or Ber Code Label	31815 (Insert Customer No. or Attach bar code label here)							
The Commissioner is hereby authorized to charge a No. 50-0921. A duplicate copy of this sheet is enclosed	iny additional fees which may be required, or credit an	y overpayment to Deposit Account						
	Respectfully submitted,							
Dated: 2/15/2005								
	By: Travis Dodd							
Phone: (818) 833-2014 Fax: (818) 833-2085	Attorneys for Applicant( P.O. Box 923127							
	Sylmar, CA 91392-3127	<u>'</u>						

CERTIFICATE OF MAILING								
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail In an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date:								
Typed or printed name	TRAVIS DODD	TRAVIS DODD						
Signature		Date						



### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Art Unit:

2838

Hisashi Tsukamoto et al.

Examiner: Edward H. Tso

Serial No:

10/718,927

Filed:

November 19, 2003

For:

IMPLANTABLE MEDICAL POWER

**MODULE** 

CERTIFICATE OF MAILING VIA FIRST CLASS MAIL (37 CFR 1.8)

Dated: February 15, 2005

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

I hereby certify that the following attached documents are being deposited with the United States Postal Service as first class mail under 37 CFR 1.8 on the date indicated above and are addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

- 1. Transmittal Letter
- 2. Fee Transmittal Letter (in duplicate)
- 3. Amendment and Request for Reconsideration
- 4. Self addressed stamped postcard

February 15, 2005

Date of Deposit

Lisa K. Robbins

Name of Person Mailing paper or fee

Signature

#### Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 1147-452 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN OR (Column 1) (Column 2) TYPE [ SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE BASIC FEE **FOR** 385.00 BASIC FEE 770.00 NUMBER FILED **NUMBER EXTRA** OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS -minus 3 = X43= X86= 42.10R MULTIPLE DEPENDENT CLAIM PRESENT +145= +290= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL TIONAL RATE RATE **AFTER PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL AFTER PREVIOUSLY **EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus

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<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

<sup>\*\*\*</sup>If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information the PATENT APPLICATION FEE DETERMINATION RECORD  Application or Docket Number											
	Substitute for Form P1O-875										
		CLAIMS AS F			ımn 2)		SMALL E	NTITY	OR	OTHER SMALL E	
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"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.